

I. Real Party in Interest

The Real Party in Interest for the appealed application is Computer Sciences Corporation.

II. Related Appeals and Interferences

There are no related appeals or interferences that will directly affect or be directly affected by or have a bearing on the Board's decision in the pending appeal.

III. Status of Claims

Claims 1-115 have been entered in the case. Claims 1-59, 64, 66-67, 76-78, 83, 85-86, 98, 100-101, and 109-115 have been cancelled. Claims 60-63, 65, 68-75, 79-82, 84, 87-97, 99, and 102-108 are pending. Claims 60-63, 65, 68-75, 79-82, 84, 87-97, 99, and 102-108 have been rejected. No claims have been allowed. Claims 60-63, 65, 68-75, 79-82, 84, 87-97, 99, and 102-108 are being appealed.

IV. Status of Amendments

An Office Action was mailed on January 30, 2007. No amendments have been made to the claims since the mailing of this Office Action.

V. Summary of Invention

This invention generally relates to methods, systems and carrier mediums for estimating the value of an insurance claims by processing insurance claims using a computer system. See Specification, page 3, lines 4-5 (all future page, paragraph, and line references in this section refer to the Specification unless otherwise indicated).

Processing insurance claims is a complex task that is typically accomplished by skilled

insurance adjusters. Recently, insurance adjusters have turned to computers to assist in evaluating insurance claims. Many earlier computer programs for determining insurance claims include a graphical user interface ("GUI") which displays screens to a user in a predefined sequence in order to collect data required to estimate an insurance claim. These earlier computer programs would then utilize the user provided inputs to generate a claim report. Many earlier computer programs may require the user to enter requested information for each display before being permitted to proceed to the next display. In addition the earlier computer programs typically did not allow a user to easily go back and edit data that was previously entered, or enter data in displays other than the predetermined display being presented. (See page 2, lines 3-16)

Recognizing the drawbacks of conventional insurance claims processing software, Appellant developed a new method, system and carrier medium for processing insurance claims.

In the method described in claim 60, a first insurance claim processing step is displayed on a display device coupled to the computer system. The first claim processing step may request and receive information from the user regarding the insurance claim. Based, at least in part, on the information received, the method includes automatically generating and displaying a table of contents. The table of contents includes an ordered list of the steps associated with processing the insurance claim. The table of contents includes a listing of the first insurance claim processing step and one or more additional insurance claims processing steps. (See page 15, lines 19-13; Figure 4; page 16, lines 15-21).

The method further allows a user to select a second insurance claim processing step, where the second insurance claim processing step includes at least one or more of the additional insurance claims processing steps included in the table of contents. The method further includes automatically displaying and receiving input regarding the selected second insurance claim processing step. (See page 16, line 28 - page 17, line 4).

Additionally, the method includes automatically adding or deleting one or more steps from the table of contents in response to input received from the first or second insurance

processing steps. Alternatively, the method also includes modifying the sequence of processing steps in response to input received from the first or second insurance processing steps. (See page 3, line 26 – page 4, line 2; page 13, lines 11-18).

In the method described in claim 75, a request to estimate an insurance claim is received, wherein the request includes a claim identifier associated with the insurance claim. The first insurance claim processing step is displayed on a display device coupled to the computer system. Based, at least in part, on the claim identifier associated with the insurance claim, the method includes generating and displaying a table of contents. The table of contents includes an ordered list of the steps associated with processing the insurance claim. The table of contents includes a listing of the first insurance claim processing step and one or more additional insurance claims processing steps that includes an end step. (See page 15, lines 19-13; Figure 4; page 16, lines 15-21).

The method further allows a user to select at least one step associated with the insurance claim. If the selected step is not the end step, the method further includes displaying and receiving input regarding the selected second insurance claim processing step. (See page 16, line 28 - page 17, line 4). The method includes automatically adding or deleting one or more steps from the table of contents in response to input received from the first or second insurance processing steps. Alternatively, the method also includes modifying the sequence of processing steps in response to input received from the first or second insurance processing steps. (See page 3, line 26 – page 4, line 2; page 13, lines 11-18).

Additionally, if the selected step is the end step, the method includes providing a display on the display device comprising an estimated value of the insurance claim. (See page 4, line 15-17).

In the system described in claim 79, the computer system includes a memory that stores program instructions which are executable by a CPU to perform a method that includes displaying a first insurance claim processing step on a display device coupled to the computer

system. The first claim processing step may request and receive information from the user regarding the insurance claim. Based, at least in part, on the information received, the method includes automatically generating and displaying a table of contents. The table of contents includes an ordered list of the steps associated with processing the insurance claim. The table of contents includes a listing of the first insurance claim processing step and one or more additional insurance claims processing steps. (See page 15, lines 19-13; Figure 4; page 16, lines 15-21).

The method further allows a user to select a second insurance claim processing step, where the second insurance claim processing step includes at least one or more of the additional insurance claims processing steps included in the table of contents. The method further includes automatically displaying and receiving input regarding the selected second insurance claim processing step. (See page 16, line 28 - page 17, line 4).

Additionally, the method includes automatically adding or deleting one or more steps from the table of contents in response to input received from the first or second insurance processing steps. Alternatively, the method also includes modifying the sequence of processing steps in response to input received from the first or second insurance processing steps. (See page 3, line 26 – page 4, line 2; page 13, lines 11-18).

In the carrier medium described in claim 94, the carrier medium includes program instructions for processing an insurance claim on a computer system to estimate a value of the insurance claim, wherein the program instructions are computer-executable to implement a method that includes displaying a first insurance claim processing step on a display device coupled to the computer system. The first claim processing step may request and receive information from the user regarding the insurance claim. Based, at least in part, on the information received, the method includes automatically generating and displaying a table of contents. The table of contents includes an ordered list of the steps associated with processing the insurance claim. The table of contents includes a listing of the first insurance claim processing step and one or more additional insurance claims processing steps. (See page 15, lines 19-13; Figure 4; page 16, lines 15-21).

The method further allows a user to select a second insurance claim processing step, where the second insurance claim processing step includes at least one or more of the additional insurance claims processing steps included in the table of contents. The method further includes automatically displaying and receiving input regarding the selected second insurance claim processing step. (See page 16, line 28 - page 17, line 4).

Additionally, the method includes automatically adding or deleting one or more steps from the table of contents in response to input received from the first or second insurance processing steps. Alternatively, the method also includes modifying the sequence of processing steps in response to input received from the first or second insurance processing steps. (See page 3, line 26 – page 4, line 2; page 13, lines 11-18).

VI. Grounds of Rejection to be Reviewed on Appeal

Claims 60-63, 65, 68-75, 79-82, 84, 87-97, 99, and 102-108 are finally rejected under 35 U.S.C. §103(a) as being obvious over Peterson et al. (U.S. Patent No. 6,343,271) (hereinafter “Peterson”) in view of Reed et al. (U.S. Patent No. 5,862,325) (hereinafter as “Reed”).

VII. Argument

Claims 60-63, 65, 68-75, 79-82, 84, 87-97, 99, and 102-108 are finally rejected under 35 U.S.C. §103(a) as being obvious over Peterson in view of Reed. Appellants traverse this rejection for the following reasons. Different groups of claims are addressed under their respective subheadings.

Claim 60

In order to reject a claim as obvious, the Examiner has the burden of establishing a *prima facie* case of obviousness. *In re Warner et al.*, 379 F.2d 1011, 154 U.S.P.Q. 173, 177-178

(C.C.P.A. 1967). To establish a *prima facie* obviousness of a claimed invention, all the claim limitations must be taught or suggested by the prior art. (emphasis added) *In re Royka*, 490 F.2d 981, 180 U.S.P.Q. 580 (C.C.P.A. 1974), MPEP § 2143.03. “All the words in a claim must be considered in judging the patentability of that claim against the prior art.” (emphasis added) *In re Wilson*, 424 F.2d 1382, 1385 (C.C.P.A. 1970). In addition, there must be some suggestion or motivation, either in the references themselves or in the knowledge generally available to one of ordinary skill in the art, to modify the reference or to combine reference teachings. *In re Vaeck*, 947 F.2d 488, 20 USPQ2d 1438 (Fed. Cir. 1991).

Claim 60 describes a combination of features including, but not limited to:

- automatically determining a table of contents based at least in part on input received regarding the first insurance claim processing step;
- automatically displaying the table of contents on the display device, wherein the table of contents comprises an ordered list of the steps associated with the processing of the insurance claim, and wherein the ordered list of steps comprises the first insurance claim processing step, and one or more additional insurance claim processing steps

Applicant respectfully submits that this feature is not taught or suggested by the cited art.

The Examiner takes the position that Peterson discloses the above-quoted feature of claim 60. Applicant respectfully disagrees with this position. The Examiner cites Peterson as teaching this feature, specifically referring to Peterson at Col 8, line 65 to Col. 9, line 60. The cited section of Peterson recites:

The elements and functions of auto adjudication system 22 and payment system 24 of FIG. 1 are disclosed in greater detail in FIG. 4. In particular, FIG. 4 illustrates, for purposes of example and not limitation, a procedure whereby a health care provider prepares and submits a claim for payment, after which the claims processing system of the invention adjudicates the claim and initiates payment on the claim if approved. The procedure according to this embodiment begins as an employee in doctor's office 44 requests and receives a claim form from the claims processing system according to the methods that have been described herein. Once the claim form has been received, the health care provider at the doctor's office 44 provides treatment to a patient 46. The diagnosis and

treatment are encoded onto the claim form as the claim is prepared for submission. According to one embodiment of the invention that will be described in greater detail hereinafter, the doctor may pretest the claim before submission in order to determine whether the claim is to be automatically adjudicated or manually adjudicated.

Creation of the claim may be accomplished using access terminals 30, or other suitable input devices at doctor's office 44. Thus, access terminals 30, and suitable software executed thereon, are examples of means for a health care provider to enter a claim. The claim is then transferred to adjudication system 48, typically using the network infrastructure, such as the Internet, that supports the claims processing systems of the invention. Accordingly, one example of means for submitting the claim for payment includes the combination of access terminal 30 or another suitable input device and the Internet or another network infrastructure for communicating with adjudication system 48.

Claims that have been determined to be automatically adjudicable, based on criteria set by the insurer, are compared against an auto adjudication database 50. A predefined set of adjudication rules are contained in auto adjudication database 50 and provide criteria by which claims are either approved or denied. Claims that relate to procedures requiring manual adjudication are transferred to a claims shop 52 where the claims are reviewed and analyzed by claims processing technicians. For example, claims shop 52 may be similar to conventional claims shops that have been used in the art to adjudicate medical insurance claims. Frequently, insurers employ private contractors 54 to review all or only certain classes of manually adjudicate claims in an effort to reduce administrative costs and increase the effectiveness of the claims review process.

Adjudication system 48 may be used to determine the adjudication status of the submitted claim, or in other words, if a submitted claim is compatible with automatic adjudication, or whether it must be manually adjudicated instead. As will be described herein in greater detail, a preliminary determination of the adjudication status of a claim may be performed before the claim is submitted. The claims processing systems of the invention may include means for sending claims submitted for payment to an entity for manual adjudication. One example of such means includes adjudication system 48 and any suitable communications pathway. Adjudication system 48 may communicate with claims shop 52 via the Internet or another wide area network. In the alternative, paper copies of submitted claims may be delivered to claims shop 52 through the mail or otherwise.

(Peterson, Col 8, line 65 - Col. 9, line 6)

Peterson discloses a communications infrastructure that allows health care providers and

patients to login and access benefits information from a claims processing system (Peterson, column 7, lines 18-20; column 8, lines 44-47). The health care provider may receive claim forms and submits claims through an access terminal (Peterson, column 9, lines 18-20). The claims may be transferred to an adjudication system for automatic adjudication or manual adjudication (Peterson, column 9, lines 25-60). Peterson does not appear to teach or suggest automatically determining a table of contents based at least in part on input received regarding the first insurance claim processing step and automatically displaying the table of contents including an ordered list of the steps associated with the processing of the insurance claim, and wherein the ordered list of steps comprises the first insurance claim processing step and one or more additional insurance claim processing steps. Applicant respectfully requests that the Examiner particularly point out how the above-cited section of Peterson relates to a displayed table of contents that includes an ordered list of the steps associated with the processing of the insurance claim. It is not evident on reading the cited section at which point Peterson creates and displays a table of contents including an ordered list of the steps associated with the processing of the insurance claim or that such a table of contents would be necessary, or even useful, for the computer implemented method described by Peterson.

Claim 60 also describes “automatically adding or deleting one or more steps from the table of contents in response to the received input from the first or second insurance claim processing step or automatically modifying the sequence of processing steps listed in the table of contents in response to the received input from the first or second insurance claim processing step.” Applicant respectfully submits that this feature is not taught or suggested by the cited art.

The Office Action acknowledges that Peterson does not teach the above-quoted feature of claim 60. Nevertheless, the Office Action asserts that Reed suggests the above-quoted feature of claim 60. Applicant respectfully disagrees with this assertion. Reed discloses using html elements in the display of communications content between providers and consumers (Reed, column 18, lines 62-67). The html elements can be filtered, sorted, and displayed by a consumer program. (Reed, column 19, line 16-19). A method may generate input forms for gathering additional data from a consumer (Reed, column 73, line 65 to column 74, line 18). Reed does

not appear to teach or suggest automatically adding or deleting one or more steps from a table of contents in response to the received input from the first or second insurance claim processing step or automatically modifying the sequence of processing steps listed in the table of contents in response to the received input from the first or second insurance claim processing step. Applicant respectfully requests that the Examiner particularly point out how the above-cited section of Reed relates to a displayed table of contents that includes an ordered list of the steps associated with the processing of the insurance claim. It is not evident, on reading the cited section, at which point Reed modifies a table of contents including an ordered list of the steps associated with the processing of the insurance claim or that such a table of contents is even used in the methods described in Reed. Furthermore, since neither Reed nor Peterson appear to explicitly, or implicitly, teach a table of contents, it is not obvious how a person of ordinary skill in the art would be motivated to create software that includes a table of contents that includes an ordered list of the steps associated with the processing of an insurance claim based on the combination of Peterson and Reed, since neither Peterson or Reed appear to teach that it would be necessary, or even useful, to use such a table of contents when processing an insurance claim.

Moreover, Applicant respectfully submits that the Examiner has not stated a *prima facie* case of obviousness for combining Peterson with Reed to include the above-quoted features of claim 60. To establish a *prima facie* case of obviousness, there must be some suggestion or motivation, either in the references themselves or in the knowledge generally available to one of ordinary skill in the art, to modify the reference or to combine reference teachings. *In re Vaeck*, 947 F.2d 488, 20 USPQ2d 1438 (Fed. Cir. 1991). The showing of a suggestion, teaching, or motivation to combine prior teachings “must be clear and particular Broad conclusory statements regarding the teaching of multiple references, standing alone, are not ‘evidence’.” *In re Dembiczak*, 175 F.3d 994, 50 U.S.P.Q.2d 1614 (Fed. Cir. 1999). Applicant respectfully submits that “providing program which can be used to create, edit, and maintain data, metadata and instructions in a provider database” does not provide a motivation to combine Peterson with Reed to include the several features of claim 60 quoted above.

Applicant submits that, for at least the reasons provided above, claim 60 and the claims depending from claim 60 are patentable over the cited art. Applicant therefore respectfully requests the removal of the 35 U.S.C. §103(a) rejections of these claims.

Claims 61, 80, and 95

Claims 61, 80, 95 and include the feature of “wherein displaying the second insurance claim processing step comprises displaying a report on the display device, wherein the report comprises a value of the insurance claim, and wherein the report is determined based on information input in the first insurance claim processing step and on any insurance claim processing steps in between the first insurance claim processing step and the second insurance claim processing step.” Applicant submits that this feature, in combination with the features of the independent claims, does not appear to be taught or suggested by Peterson, in view of Reed.

Claims 62, 81, and 96

Claims 62, 81, and 96 include the feature of “redisplaying the first insurance claim processing step after displaying the second insurance claim processing step.” Applicant submits that this feature, in combination with the features of the independent claims, does not appear to be taught or suggested by Peterson, in view of Reed.

Claims 63, 82 and 97

Claims 63, 82 and 97 include the feature of “redisplaying the first insurance claim processing step after displaying the second insurance claim processing step; and receiving input regarding the first insurance claim processing step after redisplaying the first insurance claim processing step.” Applicant submits that this feature, in combination with the features of the independent claims, does not appear to be taught or suggested by Peterson, in view of Reed.

Claims 65, 84, and 99

Claims 65, 84, and 99 include the feature of “wherein the insurance claim comprises a bodily injury claim, and wherein processing the insurance claim to estimate the value of the

insurance claim comprises processing the bodily injury claim to estimate a bodily injury general damages value.” Applicant submits that this feature, in combination with the features of the independent claims, does not appear to be taught or suggested by Peterson, in view of Reed.

Claims 68, 87 and 102

Claims 68, 87 and 102 include the feature of “wherein insurance claim processing steps comprise steps for entry of information relevant to the estimate of the value of the insurance claim.” Applicant submits that this feature, in combination with the features of the independent claims, does not appear to be taught or suggested by Peterson, in view of Reed.

Claims 71, 90 and 105

Claims 71, 90 and 105 include the feature of “wherein the table of contents further comprises pointers to display screens associated with the insurance claim processing steps.” Applicant submits that this feature, in combination with the features of the independent claims, does not appear to be taught or suggested by Peterson, in view of Reed.

Claims 72, 91 and 106

Claims 72, 91 and 106 include the feature of “storing information input at one or more insurance claim processing steps.” Applicant submits that this feature, in combination with the features of the independent claims, does not appear to be taught or suggested by Peterson, in view of Reed.

Claims 73, 92 and 107

Claims 73, 92 and 107 include the feature of “wherein insurance claim processing steps are associated with table of contents properties, and wherein determining the table of contents comprises determining insurance claim processing steps that are associated with the table of contents properties.” Applicant submits that this feature, in combination with the features of the independent claims, does not appear to be taught or suggested by Peterson, in view of Reed.

Claims 74, 93 and 108

Claims 74, 93 and 108 include the feature of “wherein insurance claim processing steps are associated with table of contents properties, wherein determining the table of contents comprises determining insurance claim processing steps that are associated with the table of contents properties, and wherein the table of contents properties comprises a condition which specifies when an associated insurance claim processing step should be included in the table of contents.” Applicant submits that this feature, in combination with the features of the independent claims, does not appear to be taught or suggested by Peterson, in view of Reed.

Claim 75

Claim 75 describes a combination of features including, but not limited to:

- determining a table of contents based at least in part on input received regarding the first insurance claim processing step;
- displaying the table of contents on the display device, wherein the table of contents comprises an ordered list of the steps associated with the processing of the insurance claim, and wherein the ordered list of steps comprises the first insurance claim processing step, and one or more additional insurance claim processing steps

Applicant respectfully submits that these features are not taught or suggested by the cited art.

The Examiner takes the position that Peterson discloses the above-quoted features of claim 75. Applicant respectfully disagrees with this position. The Examiner cites Peterson as teaching this feature, specifically referring to Peterson at Col 8, line 65 to Col. 9, line 60.

Peterson discloses a communications infrastructure that allows health care providers and patients to login and access benefits information from a claims processing system (Peterson, column 7, lines 18-20; column 8, lines 44-47). The health care provider may receive claim forms and submits claims through an access terminal (Peterson, column 9, lines 18-20). The claims

may be transferred to an adjudication system for automatic adjudication or manual adjudication (Peterson, column 9, lines 25-60). Peterson does not appear to teach or suggest automatically determining a table of contents based at least in part on input received regarding the first insurance claim processing step and automatically displaying the table of contents including an ordered list of the steps associated with the processing of the insurance claim, and wherein the ordered list of steps comprises the first insurance claim processing step and one or more additional insurance claim processing steps. Applicant respectfully requests that the Examiner particularly point out how the above-cited section of Peterson relates to a displayed table of contents that includes an ordered list of the steps associated with the processing of the insurance claim. It is not evident on reading the cited section at which point Peterson creates and displays a table of contents including an ordered list of the steps associated with the processing of the insurance claim or that such a table of contents would be necessary, or even useful, for the computer implemented method described by Peterson.

Claim 75 also describes “automatically adding or deleting one or more steps from the table of contents in response to the received input from the first or second insurance claim processing step or automatically modifying the sequence of processing steps listed in the table of contents in response to the received input from the first or second insurance claim processing step.” Applicant respectfully submits that this feature is not taught or suggested by the cited art.

The Office Action acknowledges that Peterson does not teach the above-quoted feature of claim 75. Nevertheless, the Office Action asserts that Reed suggests the above-quoted feature of claim 75. Applicant respectfully disagrees with this assertion. Reed discloses using html elements in the display of communications content between providers and consumers (Reed, column 18, lines 62-67). The html elements can be filtered, sorted, and displayed by a consumer program. (Reed, column 19, line 16-19). A method may generate input forms for gathering additional data from a consumer (Reed, column 73, line 65 to column 74, line 18). Reed does not appear to teach or suggest automatically adding or deleting one or more steps from a table of contents in response to the received input from the first or second insurance claim processing step or automatically modifying the sequence of processing steps listed in the table of contents in

response to the received input from the first or second insurance claim processing step. Applicant respectfully requests that the Examiner particularly point out how the above-cited section of Reed relates to a displayed table of contents that includes an ordered list of the steps associated with the processing of the insurance claim. It is not evident, on reading the cited section, at which point Reed modifies a table of contents including an ordered list of the steps associated with the processing of the insurance claim or that such a table of contents is even used in the methods described in Reed. Furthermore, since neither Reed nor Peterson appear to explicitly, or implicitly, teach a table of contents, it is not obvious how a person of ordinary skill in the art would be motivated to create software that includes a table of contents that includes an ordered list of the steps associated with the processing of an insurance claim based on the combination of Peterson and Reed, since neither Peterson or Reed appear to teach that it would be necessary, or even useful, to use such a table of contents when processing an insurance claim.

Applicant submits that, for at least the reasons provided above, claim 75 and the claims depending from claim 75 are patentable over the cited art. Applicant therefore respectfully requests the removal of the 35 U.S.C. §103(a) rejections of these claims.

Claim 79

Claim 79 describes a combination of features including, but not limited to:

- automatically determine a table of contents in response to input received regarding the first insurance claim processing step;
- automatically display the table of contents, wherein the table of contents comprises an ordered list of the steps associated with the processing of the insurance claim, and wherein the ordered list of steps comprises the first insurance claim processing step, and one or more additional insurance claim processing steps

Applicant respectfully submits that these features are not taught or suggested by the cited art.

The Examiner takes the position that Peterson discloses the above-quoted features of claim 79. Applicant respectfully disagrees with this position. The Examiner cites

Peterson as teaching this feature, specifically referring to Peterson at Col 8, line 65 to Col. 9, line 60.

Peterson discloses a communications infrastructure that allows health care providers and patients to login and access benefits information from a claims processing system (Peterson, column 7, lines 18-20; column 8, lines 44-47). The health care provider may receive claim forms and submits claims through an access terminal (Peterson, column 9, lines 18-20). The claims may be transferred to an adjudication system for automatic adjudication or manual adjudication (Peterson, column 9, lines 25-60). Peterson does not appear to teach or suggest automatically determining a table of contents based at least in part on input received regarding the first insurance claim processing step and automatically displaying the table of contents including an ordered list of the steps associated with the processing of the insurance claim, and wherein the ordered list of steps comprises the first insurance claim processing step and one or more additional insurance claim processing steps. Applicant respectfully requests that the Examiner particularly point out how the above-cited section of Peterson relates to a displayed table of contents that includes an ordered list of the steps associated with the processing of the insurance claim. It is not evident on reading the cited section at which point Peterson creates and displays a table of contents including an ordered list of the steps associated with the processing of the insurance claim or that such a table of contents would be necessary, or even useful, for the computer implemented method described by Peterson.

Claim 79 also describes “automatically add or delete one or more steps from the table of contents in response to the received input from the first or second insurance claim processing step or automatically modify the sequence of processing steps listed in the table of contents in response to the received input from the first or second insurance claim processing step.” Applicant respectfully submits that this feature is not taught or suggested by the cited art.

The Office Action acknowledges that Peterson does not teach the above-quoted feature of claim 79. Nevertheless, the Office Action asserts that Reed suggests the above-quoted feature of claim 79. Applicant respectfully disagrees with this assertion. Reed discloses using html

elements in the display of communications content between providers and consumers (Reed, column 18, lines 62-67). The html elements can be filtered, sorted, and displayed by a consumer program. (Reed, column 19, line 16-19). A method may generate input forms for gathering additional data from a consumer (Reed, column 73, line 65 to column 74, line 18). Reed does not appear to teach or suggest automatically adding or deleting one or more steps from a table of contents in response to the received input from the first or second insurance claim processing step or automatically modifying the sequence of processing steps listed in the table of contents in response to the received input from the first or second insurance claim processing step. Applicant respectfully requests that the Examiner particularly point out how the above-cited section of Reed relates to a displayed table of contents that includes an ordered list of the steps associated with the processing of the insurance claim. It is not evident, on reading the cited section, at which point Reed modifies a table of contents including an ordered list of the steps associated with the processing of the insurance claim or that such a table of contents is even used in the methods described in Reed. Furthermore, since neither Reed nor Peterson appear to explicitly, or implicitly, teach a table of contents, it is not obvious how a person of ordinary skill in the art would be motivated to create software that includes a table of contents that includes an ordered list of the steps associated with the processing of an insurance claim based on the combination of Peterson and Reed, since neither Peterson or Reed appear to teach that it would be necessary, or even useful, to use such a table of contents when processing an insurance claim.

Applicant submits that, for at least the reasons provided above, claim 79 and the claims depending from claim 79 are patentable over the cited art. Applicant therefore respectfully requests the removal of the 35 U.S.C. §103(a) rejections of these claims.

Claim 94

Claim 94 describes a combination of features including, but not limited to:

- automatically determining a table of contents based at least in part on input received regarding the first insurance claim processing step;
- automatically displaying the table of contents, wherein the table of contents comprises an ordered list of the steps associated with the processing of the

insurance claim, and wherein the ordered list of steps comprises the first insurance claim processing step, and one or more additional insurance claim processing steps;

Applicant respectfully submits that these features are not taught or suggested by the cited art.

The Examiner takes the position that Peterson discloses the above-quoted features of claim 94. Applicant respectfully disagrees with this position. The Examiner cites Peterson as teaching this feature, specifically referring to Peterson at Col 8, line 65 to Col. 9, line 60.

Peterson discloses a communications infrastructure that allows health care providers and patients to login and access benefits information from a claims processing system (Peterson, column 7, lines 18-20; column 8, lines 44-47). The health care provider may receive claim forms and submits claims through an access terminal (Peterson, column 9, lines 18-20). The claims may be transferred to an adjudication system for automatic adjudication or manual adjudication (Peterson, column 9, lines 25-60). Peterson does not appear to teach or suggest automatically determining a table of contents based at least in part on input received regarding the first insurance claim processing step and automatically displaying the table of contents including an ordered list of the steps associated with the processing of the insurance claim, and wherein the ordered list of steps comprises the first insurance claim processing step and one or more additional insurance claim processing steps. Applicant respectfully requests that the Examiner particularly point out how the above-cited section of Peterson relates to a displayed table of contents that includes an ordered list of the steps associated with the processing of the insurance claim. It is not evident on reading the cited section at which point Peterson creates and displays a table of contents including an ordered list of the steps associated with the processing of the insurance claim or that such a table of contents would be necessary, or even useful, for the computer implemented method described by Peterson.

Claim 94 also describes “automatically add or delete one or more steps from the table of contents in response to the received input from the first or second insurance claim processing step

or automatically modify the sequence of processing steps listed in the table of contents in response to the received input from the first or second insurance claim processing step.” Applicant respectfully submits that this feature is not taught or suggested by the cited art.

The Office Action acknowledges that Peterson does not teach the above-quoted feature of claim 94. Nevertheless, the Office Action asserts that Reed suggests the above-quoted feature of claim 94. Applicant respectfully disagrees with this assertion. Reed discloses using html elements in the display of communications content between providers and consumers (Reed, column 18, lines 62-67). The html elements can be filtered, sorted, and displayed by a consumer program. (Reed, column 19, line 16-19). A method may generate input forms for gathering additional data from a consumer (Reed, column 73, line 65 to column 74, line 18). Reed does not appear to teach or suggest automatically adding or deleting one or more steps from a table of contents in response to the received input from the first or second insurance claim processing step or automatically modifying the sequence of processing steps listed in the table of contents in response to the received input from the first or second insurance claim processing step. Applicant respectfully requests that the Examiner particularly point out how the above-cited section of Reed relates to a displayed table of contents that includes an ordered list of the steps associated with the processing of the insurance claim. It is not evident, on reading the cited section, at which point Reed modifies a table of contents including an ordered list of the steps associated with the processing of the insurance claim or that such a table of contents is even used in the methods described in Reed. Furthermore, since neither Reed nor Peterson appear to explicitly, or implicitly, teach a table of contents, it is not obvious how a person of ordinary skill in the art would be motivated to create software that includes a table of contents that includes an ordered list of the steps associated with the processing of an insurance claim based on the combination of Peterson and Reed, since neither Peterson or Reed appear to teach that it would be necessary, or even useful, to use such a table of contents when processing an insurance claim.

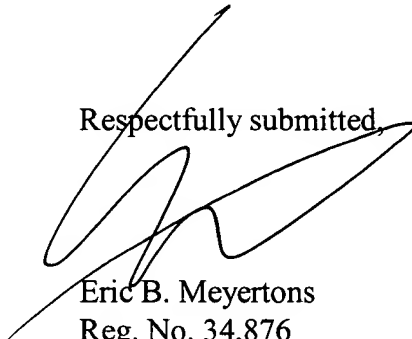
Applicant submits that, for at least the reasons provided above, claim 94 and the claims depending from claim 94 are patentable over the cited art. Applicant therefore respectfully requests the removal of the 35 U.S.C. §103(a) rejections of these claims.

VIII. Conclusion

For the foregoing reasons, it is submitted that the Examiner's rejection of claims 60-63, 65, 68-75, 79-82, 84, 87-97, 99, and 102-108 was erroneous, and reversal of his decision is respectfully requested.

A Fee Authorization is attached for the filing of this appeal brief. If any extension of time is required, Appellant hereby requests the appropriate extension of time. If any fees are omitted or if any additional fees are required or have been overpaid, please appropriately charge or credit those fees to Meyertons, Hood, Kivlin, Kowert & Goetzel, P.C. Deposit Account Number 50-1505/5053-27600/EBM.

Respectfully submitted,



Eric B. Meyertons
Reg. No. 34,876
Attorney for Applicant

MEYERTONS, HOOD, KIVLIN, KOWERT & GOETZEL, P.C.
P.O. Box 398
Austin, TX 78767-0398
(512) 853-8800 (voice)
(512) 853-8801 (facsimile)

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IX. Claims Appendix

The claims on appeal are as follows:

60. A method for processing an insurance claim on a computer system to estimate a value of the insurance claim, the method comprising:

- displaying a first insurance claim processing step on a display device coupled to the computer system;
- receiving input regarding the first insurance claim processing step;
- automatically determining a table of contents based at least in part on input received regarding the first insurance claim processing step;
- automatically displaying the table of contents on the display device, wherein the table of contents comprises an ordered list of the steps associated with the processing of the insurance claim, and wherein the ordered list of steps comprises the first insurance claim processing step, and one or more additional insurance claim processing steps;
- selecting a second insurance claim processing step, wherein the second insurance claim processing step comprises at least one of the additional insurance claim processing steps from the table of contents;
- automatically displaying the second insurance claim processing step on the display device;
- receiving input regarding the second insurance claim processing step; and
- automatically adding or deleting one or more steps from the table of contents in response to the received input from the first or second insurance claim processing step or automatically modifying the sequence of processing steps listed in the table of contents in response to the received input from the first or second insurance claim processing step.

61. The method of claim 60,

wherein displaying the second insurance claim processing step comprises displaying a report on the display device, wherein the report comprises a value of the insurance claim, and wherein the report is determined based on information input in the first insurance claim processing step and on any insurance claim processing steps in between the first insurance claim processing step and the second insurance claim processing step.

62. The method of claim 60, further comprising:

redisplaying the first insurance claim processing step after displaying the second insurance claim processing step.

63. The method of claim 60, further comprising:

redisplaying the first insurance claim processing step after displaying the second insurance claim processing step; and
receiving input regarding the first insurance claim processing step after redisplaying the first insurance claim processing step.

65. The method of claim 60,

wherein the insurance claim comprises a bodily injury claim, and wherein processing the insurance claim to estimate the value of the insurance claim comprises processing the bodily injury claim to estimate a bodily injury general damages value.

68. The method of claim 60,

wherein insurance claim processing steps comprise steps for entry of information relevant to the estimate of the value of the insurance claim.

69. The method of claim 68,

wherein the information relevant to the estimate of the value of the insurance claim comprises bodily injury treatment information.

70. The method of claim 68,
wherein the information relevant to the estimate of the value of the insurance claim
comprises bodily injury damages information.
71. The method of claim 60,
wherein the table of contents further comprises pointers to display screens associated with
the insurance claim processing steps.
72. The method of claim 60, further comprising:
storing information input at one or more insurance claim processing steps.
73. The method of claim 60,
wherein insurance claim processing steps are associated with table of contents properties,
and wherein determining the table of contents comprises determining insurance
claim processing steps that are associated with the table of contents properties.
74. The method of claim 60,
wherein insurance claim processing steps are associated with table of contents properties,
wherein determining the table of contents comprises determining insurance claim
processing steps that are associated with the table of contents properties, and
wherein the table of contents properties comprises a condition which specifies
when an associated insurance claim processing step should be included in the
table of contents.
75. A method of processing an insurance claim on a computer system using an insurance claim
processing system comprising:
receiving a request to estimate an insurance claim, wherein the request comprises a claim
identifier associated with the insurance claim;

determining a table of contents associated with the claim identifier, wherein the table of contents represents one or more steps for processing the insurance claim, and wherein at least one step comprises an end step;

displaying the table of contents on a display device coupled to the computer system, wherein the table of contents comprises an ordered list of the steps associated with the processing of the insurance claim;

selecting at least one step associated with the insurance claim;

if the selected step is not the end step then:

- providing a display on the display device coupled to the a computer system associated with the selected step;
- receiving input associated with the selected step;
- storing the input received;
- automatically adding or deleting one or more steps from the table of contents in response to the received input from the selected insurance claim processing step or automatically modifying the sequence of processing steps listed in the table of contents in response to the received input from the selected insurance claim processing step; and

if the selected step is the end step then:

- providing a display on the display device comprising an estimated value of the insurance claim.

79. A computer system for processing an insurance claim to estimate a value of the insurance claim, the computer system comprising:

- a CPU;
- a display device coupled to the CPU;
- a memory coupled to the CPU, wherein the memory stores program instructions which are executable by the CPU to:
- display a first insurance claim processing step;
- receive input regarding the first insurance claim processing step;

automatically determine a table of contents in response to input received regarding the first insurance claim processing step;
automatically display the table of contents, wherein the table of contents comprises an ordered list of the steps associated with the processing of the insurance claim, and wherein the ordered list of steps comprises the first insurance claim processing step, and one or more additional insurance claim processing steps;
select a second insurance claim processing step, wherein the second insurance claim processing step comprises at least one of the additional insurance claim processing steps from the table of contents;
automatically display the second insurance claim processing step on the display device;
and
automatically add or delete one or more steps from the table of contents in response to the received input from the first or second insurance claim processing step or automatically modify the sequence of processing steps listed in the table of contents in response to the received input from the first or second insurance claim processing step.

80. The system of claim 79,

wherein displaying the second insurance claim processing step comprises displaying a report on the display device, wherein the report comprises a value of the insurance claim, and wherein the report is determined based on information input in the first insurance claim processing step and on any insurance claim processing steps in between the first insurance claim processing step and the second insurance claim processing step.

81. The system of claim 79, wherein the program instructions are further executable to:

redisplay the first insurance claim processing step after displaying the second insurance claim processing step.

82. The system of claim 79, wherein the program instructions are further executable to:

redisplay the first insurance claim processing step after displaying the second insurance claim processing step; and
receive input regarding the first insurance claim processing step after redisplaying the first insurance claim processing step.

84. The system of claim 79,

wherein the insurance claim comprises a bodily injury claim, and wherein processing the insurance claim to estimate the value of the insurance claim comprises processing the bodily injury claim to estimate a bodily injury general damages value.

87. The system of claim 79,

wherein insurance claim processing steps comprise steps for entry of information relevant to the estimate of the value of the insurance claim.

88. The system of claim 87,

wherein the information relevant to the estimate of the value of the insurance claim comprises bodily injury treatment information.

89. The system of claim 87,

wherein the information relevant to the estimate of the value of the insurance claim comprises bodily injury damages information.

90. The system of claim 79,

wherein the table of contents further comprises pointers to display screens associated with the insurance claim processing steps.

91. The system of claim 79, wherein the program instructions are further executable to store information input at one or more insurance claim processing steps.

92. The system of claim 79,

wherein insurance claim processing steps are associated with table of contents properties,
and wherein determining the table of contents comprises determining insurance
claim processing steps that are associated with the table of contents properties.

93. The system of claim 79,

wherein insurance claim processing steps are associated with table of contents properties,
wherein determining the table of contents comprises determining insurance claim
processing steps that are associated with the table of contents properties, and
wherein at least one display in table of contents properties comprises a condition
which specifies when an associated insurance claim processing step should be
included in the table of contents.

94. A carrier medium comprising program instructions for processing an insurance claim on a
computer system to estimate a value of the insurance claim, wherein the program instructions are
computer-executable to implement:

displaying a first insurance claim processing step;
receiving input regarding the first insurance claim processing step;
automatically determining a table of contents based at least in part on input received
regarding the first insurance claim processing step;
automatically displaying the table of contents, wherein the table of contents comprises an
ordered list of the steps associated with the processing of the insurance claim, and
wherein the ordered list of steps comprises the first insurance claim processing
step, and one or more additional insurance claim processing steps;
selecting a second insurance claim processing step, wherein the second insurance claim
processing step comprises at least one of the additional insurance claim
processing steps from the table of contents;
automatically displaying the second insurance claim processing step on the display
device; and
automatically adding or deleting one or more steps from the table of contents in response
to the received input from the first or second insurance claim processing step or

automatically modifying the sequence of processing steps listed in the table of contents in response to the received input from the first or second insurance claim processing step.

95. The carrier medium of claim 94,

wherein displaying the second insurance claim processing step comprises displaying a report, wherein the report comprises a value of the insurance claim, and wherein the report is determined based on information input in the first insurance claim processing step and on any insurance claim processing steps in between the first insurance claim processing step and the second insurance claim processing step.

96. The carrier medium of claim 94, wherein the program instructions are further computer-executable to implement:

redisplaying the first insurance claim processing step after displaying the second insurance claim processing step.

97. The carrier medium of claim 94, wherein the program instructions are further computer-executable to implement:

redisplaying the first insurance claim processing step after displaying the second insurance claim processing step; and
receiving input regarding the first insurance claim processing step after redisplaying the first insurance claim processing step.

99. The carrier medium of claim 94,

wherein the insurance claim comprises a bodily injury claim, and wherein processing the insurance claim to estimate the value of the insurance claim comprises processing the bodily injury claim to estimate a bodily injury general damages value.

102. The carrier medium of claim 94,

wherein insurance claim processing steps comprise steps for entry of information relevant to the estimate of the value of the insurance claim.

103. The carrier medium of claim 102,
wherein the information relevant to the estimate of the value of the insurance claim comprises bodily injury treatment information.

104. The carrier medium of claim 102,
wherein the information relevant to the estimate of the value of the insurance claim comprises bodily injury damages information.

105. The carrier medium of claim 94,
wherein the table of contents further comprises pointers to display screens associated with the insurance claim processing steps.

106. The carrier medium of claim 94, wherein the program instructions are further computer-executable to implement:
storing information input at one or more insurance claim processing steps.

107. The carrier medium of claim 94,
wherein insurance claim processing steps are associated with table of contents properties,
and wherein determining the table of contents comprises determining insurance claim processing steps that are associated with the table of contents properties.

108. The carrier medium of claim 94,
wherein insurance claim processing steps are associated with table of contents properties,
wherein determining the table of contents comprises determining insurance claim processing steps that are associated with the table of contents properties, and
wherein at least one display in table of contents properties comprises a condition

which specifies when an associated insurance claim processing step should be included in the table of contents.

X. Evidence Appendix

No evidence submitted under 37 CFR §§ 1.130, 1.131 or 1.132 or otherwise entered by the Examiner is relied upon in this appeal.

XI. Related Proceedings Appendix

There are no related proceedings.